



COMPOUNDER'S INTERNATIONAL
ANALYTICAL LABORATORY
FDA REGISTERED LAB

Assured Excellence Through Testing Excellence

680 Atchison Way, Suite 100
Castle Rock, CO 80109
800-788-9922 Toll Free
Phone: 303-471-8015 Fax: 303-569-6101

Sample Submission Form For 503B Pharmacies

Office Use Only _____

Laboratory Work Requested By:

Name: _____

Organization: _____

Address: _____

City: _____ State _____ Zip _____

Phone: _____

Fax: _____

Email results to: _____

Email for Accounting: _____

Method of Payment: Credit Card (MC, VISA, AMEX)

Name on Card: _____

Card #: _____ EX _____

Charge Credit Card Please Invoice Check Enclosed

Available Testing and Minimum Amounts Required		
POT - Potency (3ML)	STE - Sterility (2ML or Per USP Batch Size)	PH - pH (1ML)
POS - Potency Stability (3ML/Test)	END - Endotoxin (1ML)	AET - Antimicrobial Effectiveness (55ML)
SIA - Stability Indicating Assay (See pricing guide)	FUN - Fungal (1ML)	CEI - Container Enclosure Integrity (3 Containers)
PRT - Particulates (1 Container)	SSV - Sterility / Sterility Method Suitability (10ML)	AOC - Appearance, Odor, and Color (1 Container)
Miscellaneous Minimum Amounts Required		
Troches, Pellets, Suppositories, Capsules, and Tablets: 5	Creams, Gels, and Ointments: 5 GM	Triturations: 500 MG

	Active(s) / Concentrations and Batch Size	Lot Number	Test(s) Requested <i>(Use Letter Code)*</i>	Storage <i>(RT, RF, FZ, 40°C)</i>	Testing Time Points and/or comments or instructions
1			Pool []		
2			Pool []		
3			Pool []		
4			Pool []		
5			Pool []		